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THE FREQUENCY OF ILLEGAL ABORTION

To the Editor, The Eugenics Review

Sir,—Dr. Goodhart has done great service by directing further attention towards the problem of Abortion in his article "The Frequency of Illegal Abortion", in the January 1964 number of THE EUGENICS REVIEW (55, 197).

The explanation of his "paradoxical conclusion" is that the mortality rate for abortion bears no relation to the maternal mortality rate. In fact, the mortality rate of legal abortion varies according to the law and its interpretation. This in turn has its effect upon the number of illegal abortions.

In New York City between 1943-47 there were 3,046 therapeutic abortions of local residents and seven deaths i.e. a mortality rate of 230 per 100,000. In Denmark between 1953-57 there were 23,666 legal abortions and sixteen deaths i.e. a mortality rate of 68 per 100,000. In Eastern Europe the average mortality rate for legal abortion is now six per 100,000 operations.

The apparent discrepancy in these figures is due to the fact that in Eastern Europe most legal abortions are performed before the twelfth week of pregnancy. In Denmark 25 per cent of legal abortions were performed after the twelfth week and required a hysterotomy. The American figures pertain to an earlier decade and probably to patients in a much poorer state of health.

The results of a survey conducted under the auspices of the General Register Office 1955-56 imply that some 70,000 women in England and Wales consult their doctor during the course of a year about abortion, and of this total 36 per cent were admitted to hospital. It is not suggested that all these abortions were criminal but it is also pointed out that women do not seek medical help unless there are complications.

In 1962 the Emergency Bed Service reported that they were asked to find beds for 5,743 abortion cases. This represents a 40 per cent increase over the past eight years despite the fact that the demand for acute surgical beds has remained constant.

Death from illegal abortion is nowadays usually due to air embolus or surgical shock. Haemorrhage and sepsis are almost always

controlled when patients are subsequently admitted to hospital. This is why the mortality rate for illegal abortion has fallen so dramatically in this country.

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Dr. C. B. Goodhart writes:

It is frequently said that there are upwards of 100,000 illegal abortions in Great Britain every year, and that most of them are procured by unqualified "back-street" abortionists with very grave risks to the women concerned. I would claim to have shown that these two propositions cannot possibly both be true: either the number of illegal abortions has been grossly exaggerated, or the risks to the mother can be little more than in allowing the child to be born in the normal way

Dr. Darby favours the second alternative of a high illegal abortion rate with low maternal risk, and he may well be right, though there is little evidence either way. But it is worth considering some of the implications of 100,000 illegal abortions a year, and even higher figures have been mentioned—250,000 for example, by Mr. N. W. Pirie F.R.S. in the March number of the Association of Scientific Workers Journal, 10 (2): 4.

As there must be about 10 million women of child-bearing age in this country, 100,000 illegal abortions gives one for 100 women every year, and a doctor with a panel of 2,500 should expect that four of his patients will have undergone one during the previous twelve months. And since women can bear children for rather more than thirty years, this means that on average there will be one illegal abortion for every three women over the whole child-bearing period. That may be so but it sounds a lot, and it all depends upon the correctness of the figure of 100,000: and where exactly is the evidence supporting that estimate?

It is surely not to be found in the figure quoted of 70,000 women consulting their doctors about abortion each year. Apart from very early cases unnoticed by the mother, genuinely spontaneous abortion in the second and third months is common enough, and will mostly occur in